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CONFIRMATION NO. 2510

Bib Data Sheet

| SERIAL NUMBER<br>10/662,914 | FILING OR 371(c)<br>DATE<br>09/15/2003<br>RULE | CLASS<br>435 | GROUP ART UNIT<br>1652 | ATTORNEY<br>DOCKET NO.<br>19603/4261 (CRF D-<br>2895A) |
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/410,736 09/13/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 12/08/2003

|                                 |   |                        |                         |                    |                         |
|---------------------------------|---|------------------------|-------------------------|--------------------|-------------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no                                   | STATE OR COUNTRY<br>NY | SHEETS<br>DRAWING<br>34 | TOTAL CLAIMS<br>92 | INDEPENDENT CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                        |                         |                    |                         |
| Verified and Acknowledged       | Examiner's Signature  | Initials               |                         |                    |                         |

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**TITLE**

USING MUTATIONS TO IMPROVE ASPERGILLUS PHYTASES

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|------------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>2176 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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